

King County Department of Assessments 500 4th Avenue, Room 736

500 4^m Avenue, Room 736 Seattle, WA 98104-2384

Phone: (206) 296-5126 Fax: (206) 296-0107 Email: personal.property@kingcounty.gov

John Wilson Assessor

NEW BUSINESS PERSONAL PROPERTY ACCOUNT SETUP

Check this box if this is a new account					
Check this box if this is a new account based on a business moving to a dif					
Former Owner Name:	ioroni ioodiio	iii (ooiiipioto o	conon solon do app		
Former Business Name:					
Former Location Address:					
ACCOUNT INFORMATION					
Taxpayer Name:		Attention:			
Mailing Address:	City:		State:	Zip:	
Business Name:			I .		
Physical Address:	City:		State WA	Zip:	
Phone Number:	Fax Numbe				
Email Address (address to contact regar	rding person	al property acc	count or listing):		
NAIGO - B B I IIBI				Check to receive listings via email	
NAICS or Business Description: UBI N		er:	Date Opened:		
Legal Entity (Please Mark One) Sole Proprietor Corporation- Corporation-WA State Other (Inclu Widow or widower? Over 65 res	ding LLC, LL	P, etc.) Liv	ing with a spouse or east 10 years?	dependent?	
PERSONAL PROPERTY LISTING Owned Business Assets (Please attach a Supplies (Monthly Cost):	dditional pag	ges if necessa	ry)		
Category Code or Description		uisition Year Original Cost (Excluding Sales Ta		luding Sales Tax)	
Check here if you own the building wh report Leasehold/Tenant Improvemer Real Property Parcel Number (if know Leasehold/Tenant Improvements (Please	nts. wn):	-	·	ding, do not	
Description				st (Including Sales Tax)	
PREPARER INFORMATION Name:*					
Email:					
*If the preparer is an agent of the taxpayer please attach a letter of authorization.					